

AMENDED IN ASSEMBLY AUGUST 22, 2006

AMENDED IN ASSEMBLY JUNE 5, 2006

AMENDED IN ASSEMBLY JUNE 23, 2005

AMENDED IN SENATE MAY 27, 2005

AMENDED IN SENATE APRIL 20, 2005

SENATE BILL

No. 559

Introduced by Senator Torlakson

February 18, 2005

An act to amend Section 1250.8 of the Health and Safety Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

SB 559, as amended, Torlakson. Health facilities: general acute care hospitals: consolidated permits.

Existing law provides for the licensure and regulation by the State Department of Health Services of health facilities, including general acute care hospitals, as defined. Existing law prohibits the department from issuing a single consolidated license to a general acute care hospital that has 2 or more physical plants at more than one site that are more than 15 miles apart unless the hospital meets certain criteria.

This bill would, notwithstanding that prohibition, authorize the Director of Health Services to issue a single consolidated license for a general acute care hospital to Children's Hospital Oakland and the John Muir Medical Center, Concord campus.

Existing law provides for the Medi-Cal program, which is administered by the department and under which qualified low-income persons receive health care benefits, including hospital

services. Existing law establishes the Medi-Cal Hospital/Uninsured Care Demonstration Project Act, which revised hospital reimbursement methodologies in order to maximize the use of federal funds consistent with federal Medicaid law to stabilize the distribution of funding for hospitals that provide care to Medi-Cal beneficiaries and uninsured patients.

This bill would require, to the extent permitted by federal law, the adjustment of those payments made pursuant to the act to Children's Hospital Oakland, as prescribed.

The bill would declare that, due to the unique circumstances pertaining to Children's Hospital Oakland and the John Muir Medical Center, Concord campus, that the bill is intended to remedy, a general statute within the meaning of specified provisions of the Constitution cannot be made applicable and a special statute is necessary.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1250.8 of the Health and Safety Code is
- 2 amended to read:
- 3 1250.8. (a) Notwithstanding subdivision (a) of Section
- 4 437.10, the state department, upon application of a general acute
- 5 care hospital which meets all the criteria of subdivision (b), and
- 6 other applicable requirements of licensure, shall issue a single
- 7 consolidated license to a general acute care hospital which
- 8 includes more than one physical plant maintained and operated
- 9 on separate premises or which has multiple licenses for a single
- 10 health facility on the same premises. A single consolidated
- 11 license shall not be issued where the separate freestanding
- 12 physical plant is a skilled nursing facility or an intermediate care
- 13 facility, whether or not the location of the skilled nursing facility
- 14 or intermediate care facility is contiguous to the general acute
- 15 care hospital unless the hospital is exempt from the requirements
- 16 of subdivision (b) of Section 1254, or the facility is part of the
- 17 physical structure licensed to provide acute care.
- 18 (b) The issuance of a single consolidated license shall be based
- 19 on the following criteria:
- 20 (1) There is a single governing body for all of the facilities
- 21 maintained and operated by the licensee.

1 (2) There is a single administration for all of the facilities
2 maintained and operated by the licensee.

3 (3) There is a single medical staff for all of the facilities
4 maintained and operated by the licensee, with a single set of
5 bylaws, rules, and regulations, which prescribe a single
6 committee structure.

7 (4) Except as provided otherwise in this paragraph, the
8 physical plants maintained and operated by the licensee which
9 are to be covered by the single consolidated license are located
10 not more than 15 miles apart. If an applicant provides evidence
11 satisfactory to the department that it can comply with all
12 requirements of licensure and provide quality care and adequate
13 administrative and professional supervision, the director may
14 issue a single consolidated license to a general acute care hospital
15 that operates two or more physical plants located more than 15
16 miles apart under any of the following circumstances:

17 (A) One or more of the physical plants is located in a rural
18 area, as defined by regulations of the director.

19 (B) One or more of the physical plants provides only
20 outpatient services, as defined by the department.

21 (C) If Section 14105.986 of the Welfare and Institutions Code
22 is implemented and the applicant meets all of the following
23 criteria:

24 (i) The applicant is a nonprofit corporation.

25 (ii) The applicant is a children's hospital listed in Section
26 10727 of the Welfare and Institutions Code.

27 (iii) The applicant is affiliated with a major university medical
28 school, and located adjacent thereto.

29 (iv) The applicant operates a regional tertiary care facility.

30 (v) One of the physical plants is located in a county that has a
31 consolidated and county government structure.

32 (vi) One of the physical plants is located in a county having a
33 population between 1 million and 2 million.

34 (vii) The applicant is located in a city with a population
35 between 50,000 and 100,000.

36 (c) In issuing the single consolidated license, the state
37 department shall specify the location of each supplemental
38 service and the location of the number and category of beds
39 provided by the licensee. The single consolidated license shall be
40 renewed annually.

(d) To the extent required by Part 1.5 (commencing with Section 437) of Division 1, a general acute care hospital which has been issued a single consolidated license:

(1) Shall not transfer from one facility to another a special service described in Section 1255 without first obtaining a certificate of need.

(2) Shall not transfer, in whole or in part, from one facility to another, a supplemental service, as defined in regulations of the director pursuant to this chapter, without first obtaining a certificate of need, unless the licensee, 30 days prior to the relocation, notifies the Office of Statewide Health Planning and Development, the applicable health systems agency, and the state department of the licensee's intent to relocate the supplemental service, and includes with this notice a cost estimate, certified by a person qualified by experience or training to render the estimates, which estimates that the cost of the transfer will not exceed the capital expenditure threshold established by the Office of Statewide Health Planning and Development pursuant to Section 437.10.

(3) Shall not transfer beds from one facility to another facility, without first obtaining a certificate of need unless, 30 days prior to the relocation, the licensee notifies the Office of Statewide Health Planning and Development, the applicable health systems agency, and the state department of the licensee's intent to relocate health facility beds, and includes with this notice both of the following:

(A) A cost estimate, certified by a person qualified by experience or training to render the estimates, which estimates that the cost of the relocation will not exceed the capital expenditure threshold established by the Office of Statewide Health Planning and Development pursuant to Section 437.10.

(B) The identification of the number, classification, and location of the health facility beds in the transferor facility and the proposed number, classification, and location of the health facility beds in the transferee facility.

Except as otherwise permitted in Part 1.5 (commencing with Section 437) of Division 1, or as authorized in an approved certificate of need pursuant to that part, health facility beds transferred pursuant to this section shall be used in the transferee

1 facility in the same bed classification as defined in Section
2 1250.1, as the beds were classified in the transferor facility.

3 Health facility beds transferred pursuant to this section shall
4 not be transferred back to the transferor facility for two years
5 from the date of the transfer, regardless of cost, without first
6 obtaining a certificate of need pursuant to Part 1.5 (commencing
7 with Section 437) of Division 1.

8 (e) All transfers pursuant to subdivision (d) shall satisfy all
9 applicable requirements of licensure and shall be subject to the
10 written approval, if required, of the state department. The state
11 department may adopt regulations which are necessary to
12 implement the provisions of this section. These regulations may
13 include a requirement that each facility of a health facility subject
14 to a single consolidated license have an onsite full-time or
15 part-time administrator.

16 (f) As used in this section, "facility" means any physical plant
17 operated or maintained by a health facility subject to a single,
18 consolidated license issued pursuant to this section.

19 (g) For purposes of selective provider contracts negotiated
20 under the Medi-Cal program, the treatment of a health facility
21 with a single consolidated license issued pursuant to this section
22 shall be subject to negotiation between the health facility and the
23 California Medical Assistance Commission. A general acute care
24 hospital which is issued a single consolidated license pursuant to
25 this section may, at its option, receive from the state department
26 a single Medi-Cal program provider number or separate
27 Medi-Cal program provider numbers for one or more of the
28 facilities subject to the single consolidated license. Irrespective of
29 whether the general acute care hospital is issued one or more
30 Medi-Cal provider numbers, the state department may require the
31 hospital to file separate cost reports for each facility pursuant to
32 Section 14170 of the Welfare and Institutions Code.

33 (h) For purposes of the Annual Report of Hospitals required
34 by regulations adopted by the state department pursuant to this
35 part, the state department and the Office of Statewide Health
36 Planning and Development may require reporting of bed and
37 service utilization data separately by each facility of a general
38 acute care hospital issued a single consolidated license pursuant
39 to this section.

(i) The amendments made to this section during the 1985–86 Regular Session of the Legislature pertaining to the issuance of a single consolidated license to a general acute care hospital in the case where the separate physical plant is a skilled nursing facility or intermediate care facility shall not apply to the following facilities:

(1) Any facility which obtained a certificate of need after August 1, 1984, and prior to February 14, 1985, as described in this subdivision. The certificate of need shall be for the construction of a skilled nursing facility or intermediate care facility which is the same facility for which the hospital applies for a single consolidated license, pursuant to subdivision (a).

(2) Any facility for which a single consolidated license has been issued pursuant to subdivision (a), as described in this subdivision, prior to the effective date of the amendments made to this section during the 1985–86 Regular Session of the Legislature.

Any facility which has been issued a single consolidated license pursuant to subdivision (a), as described in this subdivision, shall be granted renewal licenses based upon the same criteria used for the initial consolidated license.

(j) If the state department issues a single consolidated license pursuant to this section, the state department may take any action authorized by this chapter, including, but not limited to, any action specified in Article 5 (commencing with Section 1294), with respect to any facility, or any service provided in any facility, which is included in the consolidated license.

(k) The eligibility for participation in the Medi-Cal program (Chapter 7 (commencing with Section 14000), Part 3, Division 9, Welfare and Institutions Code) of any facility that is included in a consolidated license issued pursuant to this section, provides outpatient services, and is located more than 15 miles from the health facility issued the consolidated license shall be subject to a determination of eligibility by the state department. This subdivision shall not apply to any facility that is located in a rural area and is included in a consolidated license issued pursuant to subparagraphs (A), (B), and (C) of paragraph (4) of subdivision (b). Regardless of whether a facility has received or not received a determination of eligibility pursuant to this subdivision, this subdivision shall not affect the ability of a licensed professional,

1 providing services covered by the Medi-Cal program to a person
2 eligible for Medi-Cal in a facility subject to a determination of
3 eligibility pursuant to this subdivision, to bill the Medi-Cal
4 program for those services provided in accordance with
5 applicable regulations.

6 (l) Notwithstanding any other provision of law, the director
7 may issue a single consolidated license for a general acute care
8 hospital to Children's Hospital Oakland and San Ramon
9 Regional Medical Center.

10 (m) Notwithstanding any other provision of law, the director
11 may issue a single consolidated license for a general acute care
12 hospital to Children's Hospital Oakland and the John Muir
13 Medical Center, Concord campus.

14 (n) (1) *To the extent permitted by federal law, payments made*
15 *to Children's Hospital Oakland pursuant to Section 14166.11 of*
16 *the Welfare and Institutions Code shall be adjusted as follows:*

17 (A) *The number of Medi-Cal payment days and net revenues*
18 *calculated for the John Muir Medical Center Concord campus*
19 *under the consolidated license shall not be used for eligibility*
20 *purposes for the private hospital disproportionate share hospital*
21 *replacement funds for Children's Hospital Oakland.*

22 (B) *The number of Medi-Cal payment days calculated for*
23 *hospital beds located at John Muir Medical Center Concord*
24 *campus that are included in the consolidated license beginning in*
25 *the 2007–08 fiscal year shall only be used for purposes of*
26 *calculating disproportionate share hospital payments authorized*
27 *under Section 14166.11 of the Welfare and Institutions Code at*
28 *Children's Hospital Oakland to the extent that the inclusion of*
29 *those days does not exceed the total Medi-Cal payment days used*
30 *to calculate Children's Hospital Oakland payments for the*
31 *2006–07 fiscal year disproportionate share replacement.*

32 (2) *This subdivision shall become inoperative in the event that*
33 *the two facilities covered under the consolidated license*
34 *described in subdivision (a) are located within a 15-mile radius*
35 *of each other.*

36 SEC. 2. The Legislature finds and declares that a general
37 statute cannot be made applicable within the meaning of Section
38 16 of Article IV of the California Constitution due to the unique
39 circumstances of Children's Hospital Oakland and the John Muir
40 Medical Center, Concord campus. This act is necessary to enable

- 1 Children’s Hospital Oakland to operate a pediatric unit at the
- 2 John Muir Medical Center, Concord campus to provide pediatric
- 3 medical services to infants and children in Contra Costa and
- 4 southern Solano Counties, where those services are in high
- 5 demand and are largely unavailable.

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